

North Carolina Department of Health and Human Services  
Division of Mental Health, Developmental Disabilities and Substance Abuse Services

## NC-TOPPS

North Carolina Treatment Outcomes and Program Performance System

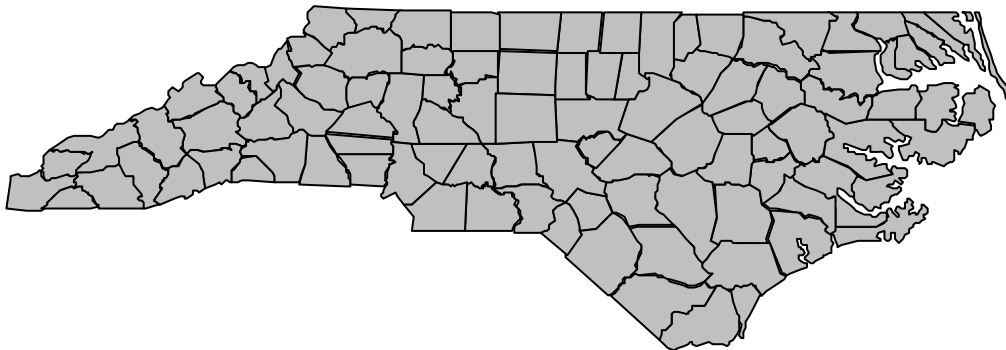
### Adult Substance Abuse Consumers Catawba LME

**Initial Matched to 3-Month Update or Completed Treatment Interview**

**Initials Conducted: January 1, 2006 through December 31, 2006**

**(Note: This report includes 3-month or Discharge Completed Treatment Interviews thru June 2007)**

*Purpose of Report: To assess behavior for consumers progressing in treatment or who have been discharged as "completed treatment." Consumers are included who have at least one month but not more than six months of treatment when discharged or when the 3 month interview was conducted.*



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July 2007



## Matched Initial/Update Report

This feedback report is available to Local Management Entities, providers and the NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services on data gathered for substance abuse consumers through the North Carolina Treatment Outcomes and Program Performance System (NC-TOPPS). This report provides information gathered through the online NC-TOPPS Initial and Update or Episode Completion (Discharge) Interviews. It provides charts, tables and text information on substance abuse consumers' demographic characteristics, substance use, symptoms, behaviors and activities, service needs, supports and barriers, family and housing issues and outcome measures collected through an interview with the consumer during treatment. It should be noted that not every data element or response category on the NC-TOPPS Interviews are displayed in this report.

Throughout this report, the word "Update" will also refer to the completed treatment interview.

Please note that the charts and tables may not always match online queries that you may conduct. The data used in these reports will not necessarily reflect the same points in time. In addition, NDRI who produces these reports cleans the data and removes apparent duplicates prior to preparing the tables and charts.

Additional information about NC-TOPPS and pdf copies of the online NC-TOPPS interviews are located at:

<http://nctopps.ncdmh.net/>

## General Information on Interpreting Tables

<b>Types of Statistics</b>	<ul style="list-style-type: none"> <li>▶ A <u>count</u> shows the actual number (often designated by the letter "n" ) of clients.</li> <li>▶ A <u>percentage</u> is the number of clients with a characteristic or behavior divided by all the clients in the group of interest multiplied by 100. Percentages will be designated with a % sign next to the number.</li> <li>▶ An <u>average</u> is the sum of a set of numbers divided by the number of numbers in the set. When a number in a cell is an average, the word average will appear in the row descriptor.</li> <li>▶ A <u>median</u> is the middle number in a set of numbers, arranged from lowest to highest. For example, the median for the following numbers: 9, 12, 12, 15, 17, 20, <b>22</b>, 23, 25, 28, 31, 35, 62 is the bolded number, 22. Medians are important measures of central tendency, especially when a mean may be skewed by a very high or very low value. When a number in a cell is a median, the word median will appear in the row descriptor.</li> </ul>
<b>Missing Data</b>	For many of the NC-TOPPS interviews, a particular item or question may have been left blank. In calculating the means, medians, and percentages in cells of questionnaire items, this missing data is excluded from the calculation. For example, program X may have submitted 50 assessments but in 2 of the assessments, gender was left blank. When the percent of males is calculated, the 25 males are shown as 52% (25/48*100).
<b>Denominator</b>	The denominator for nearly all percentages is the number of cases shown on the bottom left of the page minus item missing data. All exceptions to this general rule are <b>specifically noted</b> with appropriate text in the graphic or table. This text will state which group is included or excluded from the denominator, such as "of those in the labor force" or "of those with children."
<b>Multiple Response</b>	"Multiple response" indicates a "mark all that apply" type question in which more than one response to a question is allowed. The total of responses may add to greater than 100%. Examples are health insurance or target population. This is in contrast to items such as gender where only a single response is allowed.
<b>Time periods of behaviors in Assessments</b>	Behaviors are measured at several time periods including the past year, the past 6-months, the past 3-months, the past month, or since last interview. For the Initial Interviews, the time periods can generally be construed to mean the time period before treatment begins. For the Update Assessments the time is measured from the time at which the interview occurs back one month, 3-months, or since the last assessment.
<b>Definitions of terms</b>	The Appendix at the end of the report gives definitions of acronyms, abbreviations, and other terms used in this report.
<b>Notes:</b>	Report excludes consumers in private methadone treatment programs.

**Catawba Adult Substance Abuse Consumers**  
**Initial Matched to 3-Month Update or Completed Treatment Interview**  
**Initials Conducted January 1, 2006 through December 31, 2006**

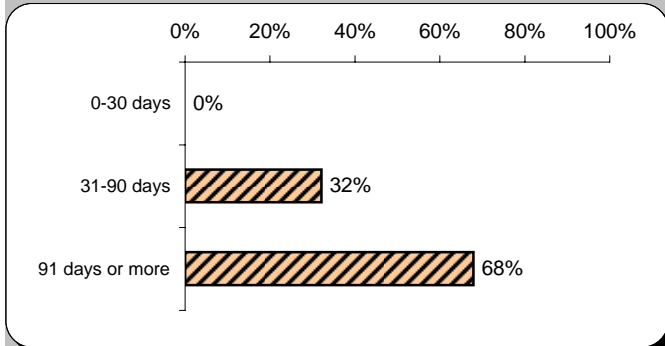
This table shows the number of matched consumers in this report by provider. This is the number of Initials done during the calendar year 2006 for whom there was a 3-month update interview or a treatment completion interview was conducted.

<b>Provider</b>	<b>City</b>	<b>ProviderID</b>	<b>Number</b>
Alcohol and Drug Services	Hickory	284	28
Catawba Valley Behavioral Healthcare	Hickory	139	3
Clay, Wilson, and Associates	Hickory	137	200
Family NET of Catawba County	Hickory	221	18
Total			249

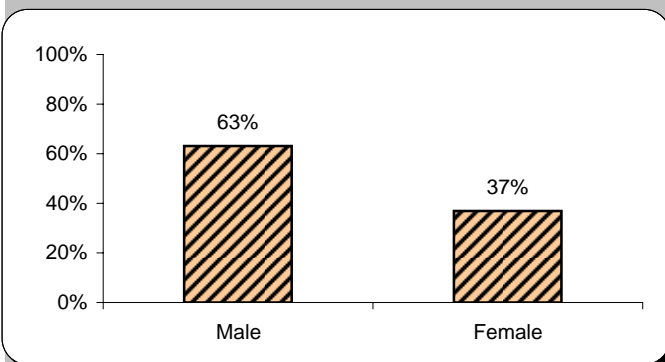
## Part I

Part I of this report includes descriptive information about the matched consumers. This information on the types of consumers, time in treatment, types of services needed and being rendered helps with the understanding of the behavioral changes shown in Part II and Part III of this report.

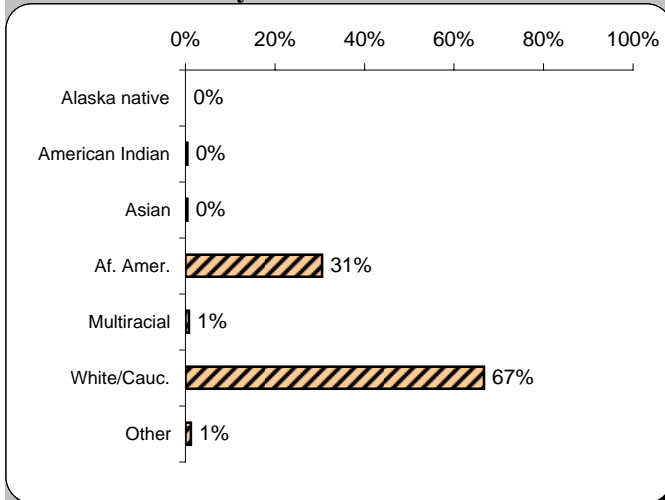
### 1-1: Days Between Initial and Update Interviews



### 1-2: Gender



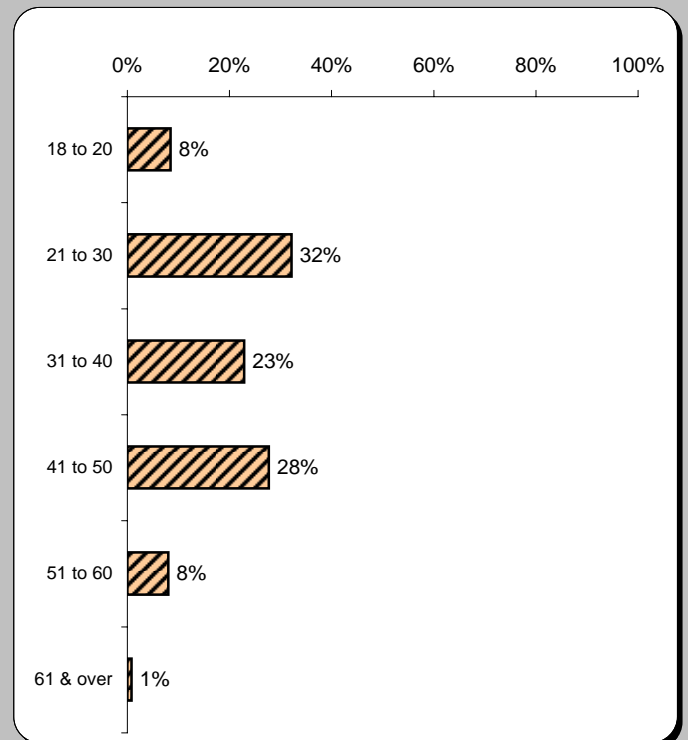
### 1-3: Race/Ethnicity



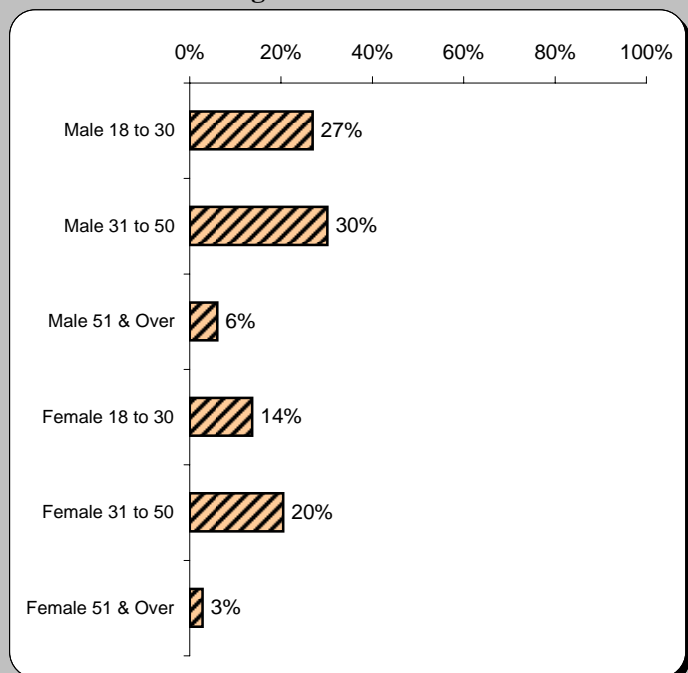
### 1-4: Hispanic

2% of Catawba consumers are Hispanic.

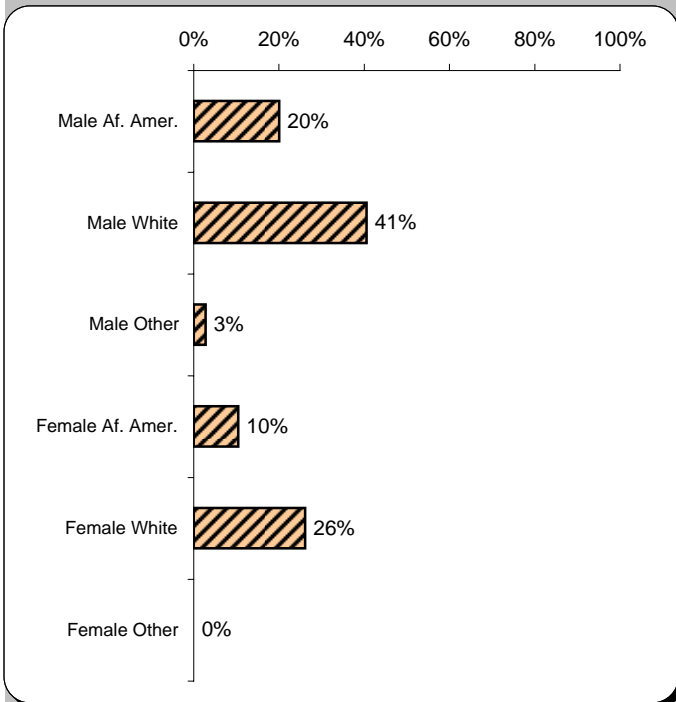
### 1-5: Age Group



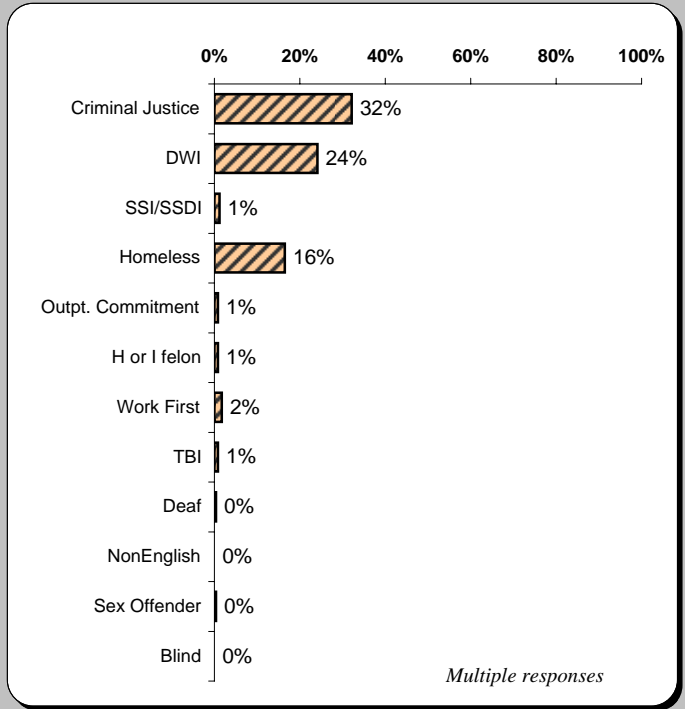
### 1-6: Gender and Age



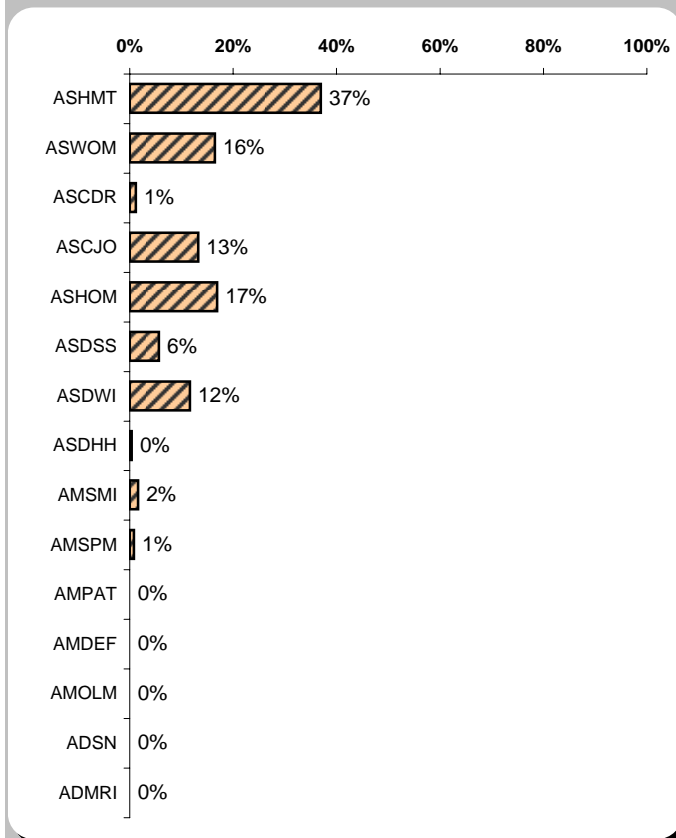
## 2-1: Gender and Ethnicity



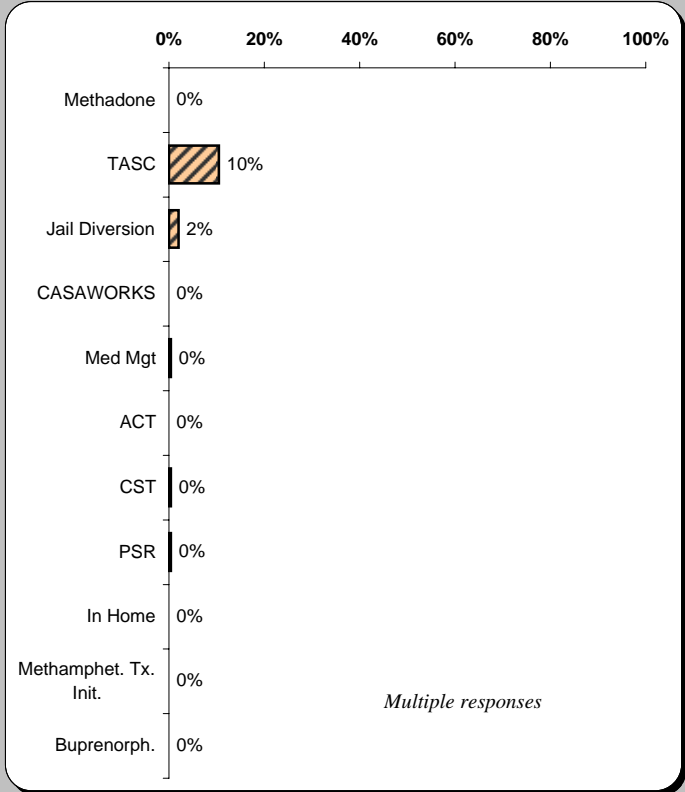
## 2-3: Special Populations at Update



## 2-2: IPRS Target Populations at Update

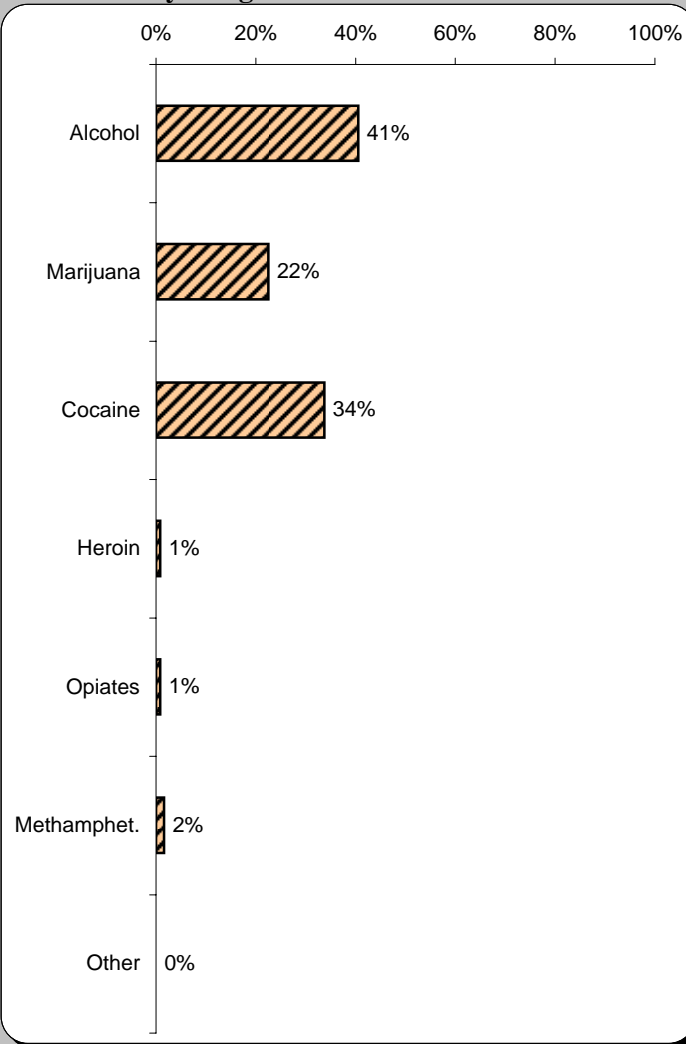


## 2-4: Special Programs at Update



Note: See appendix for definitions of acronyms used on this page.

### 3-1: Primary Drug Problem at Initial Interview



### 3-2: DSM-IV Diagnoses at Update

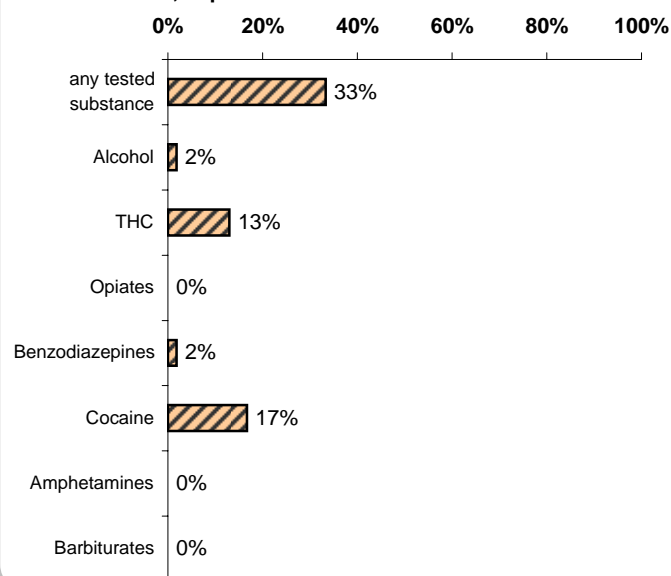
Diagnostic Category	
Drug Dependence	49%
Alcohol Dependence	35%
Drug Abuse	25%
Alcohol Abuse	23%
Major depression	8%
Bipolar disorder	9%
Schizophrenia	1%
Anxiety disorder	7%
PTSD	4%
Personality disorder	1%

Only most common diagnoses shown. Multiple response

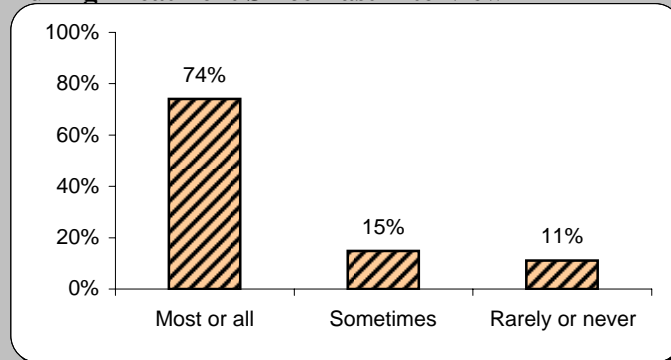
### 3-3: Drug Test Results During Treatment

Since Last Assessmt	
Number of consumers tested	54
Percent of consumers tested	22%
Average # of tests for each consumer tested	3.1

#### Of those tested, % positive for



### 3-4: Attendance at Scheduled Treatment Sessions, During Treatment Since Last Interview

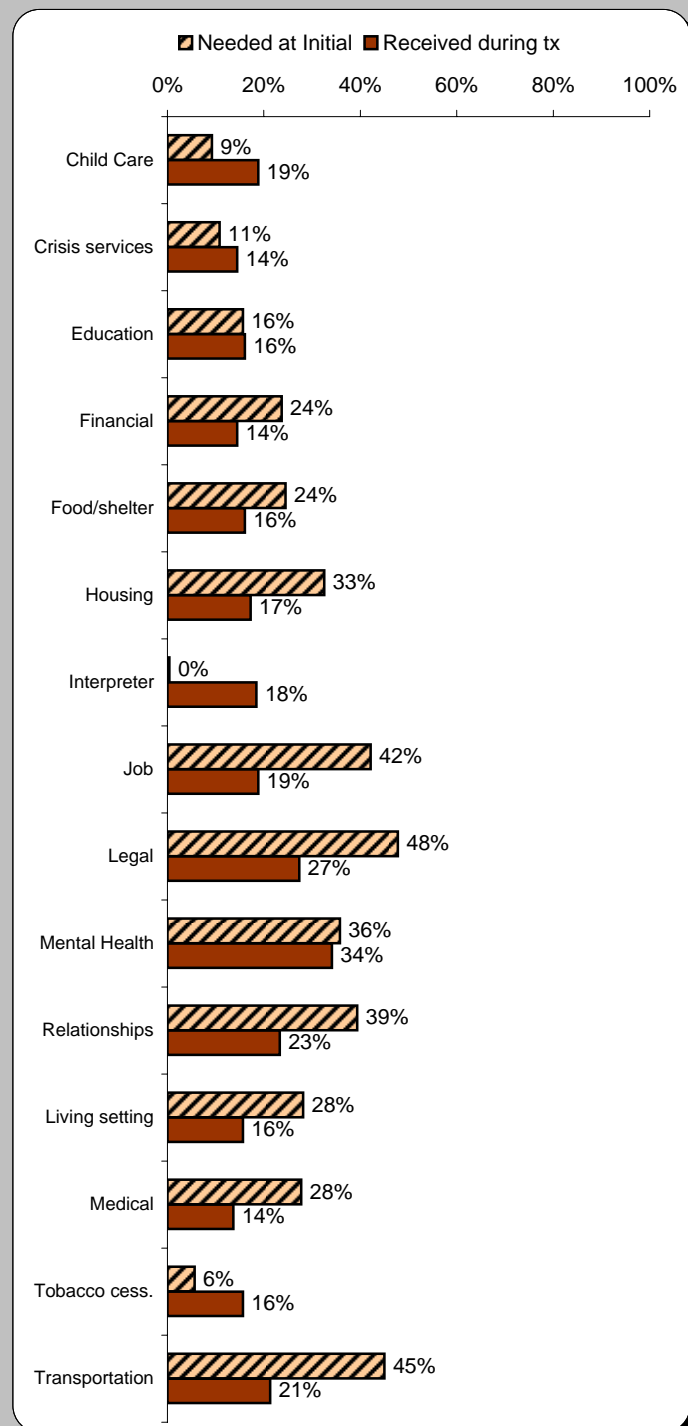


### 3-5 Family Involvement with Staff Concerning Treatment Services and/or Person-centered Planning During Past 3-months of Treatment

Family Involvement with...	
Treatment Services and/or PCP	8%
Treatment Services	7%
Person-centered planning (PCP)	1%

## 4-1: Services Needed and Received

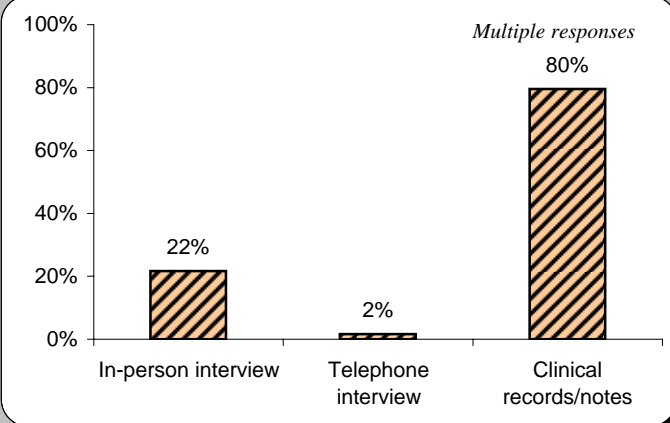
This chart compares information from the Initial Interview about whether a service area is very important to information from the Update Interview about whether the service was received during treatment.



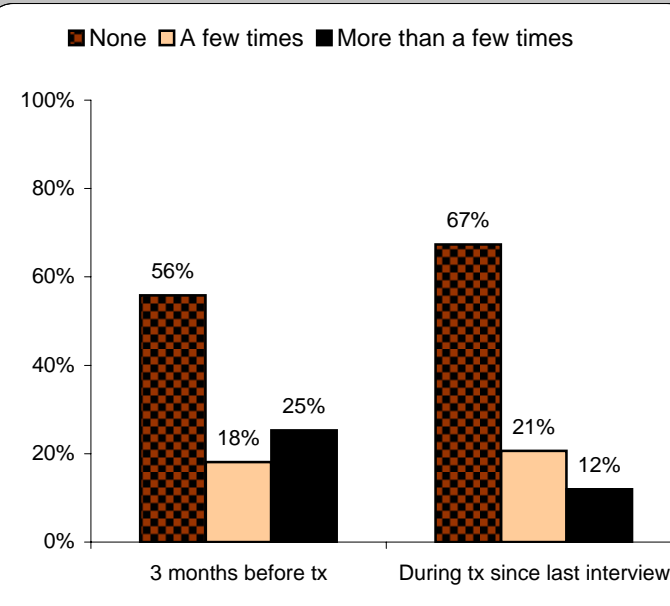
## Part II

Charts and Graphs 4-2 thru 5-9 are related to consumers' employment, daily activities, living situation, substance use, and arrests. Some graphs and tables compare information collected at the Initial Interview with information collected in the Update or Episode Completion (Discharge) Interview. Initial information is designed to be collected by means of a personal interview with the consumer. The preferred method for completing the Update items in this section is by means of a personal interview, however, telephone interview, or clinical records or notes are also used. Chart 4-2 shows how it was completed for the current group of consumers:

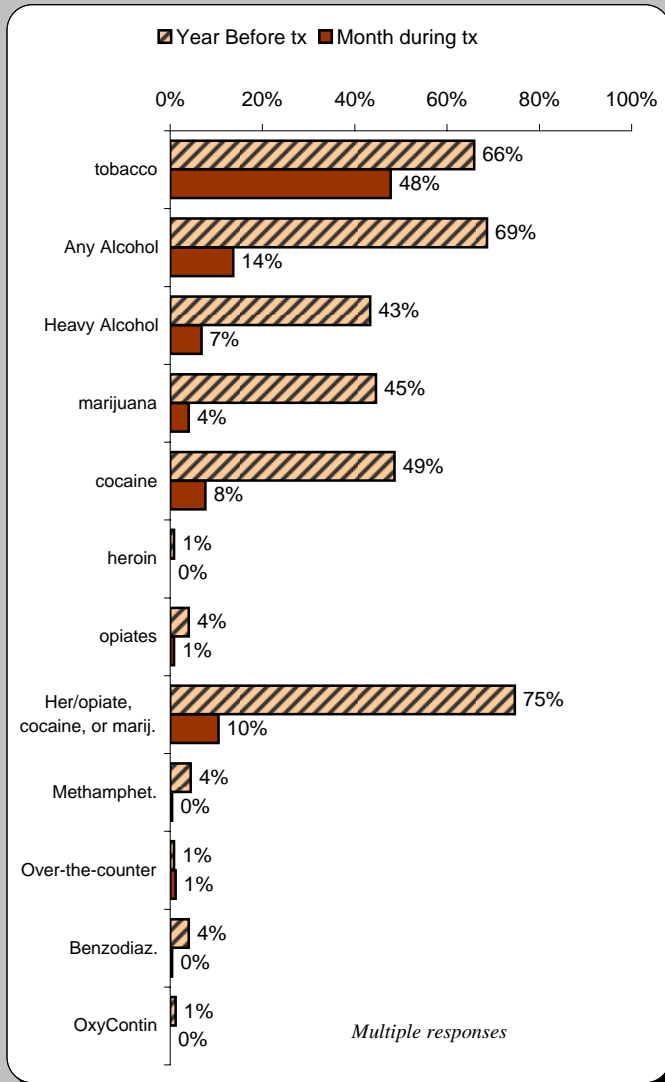
## 4-2 Update Data Collection Method



## 4-3: How Often Problems Interfere with Work, School, or Other Daily Activities



## 5-1: Substance Use



## 5-2: Cigarette Smoking

	Month before tx	Month during tx
Smoke cigarettes	64%	47%
Smoke a pack a day or more	36%	28%

## 5-3 Homeless Consumers

	3-Months before tx	During tx since last interview
In Shelters	15	13
Not in Shelters	5	2
Total Homeless	20	15

*Note: see introduction for explanations of time periods used.*

Number of matched Initial/Update Interviews: Catawba = 249

## 5-4: Employment

	3-Months before tx	Month during tx
% In labor force	84%	83%
Of those in the labor force...		
Employed full-time	49%	56%
Employed part-time	13%	17%
Unemployed (seeking work)	37%	27%
Of those working...		
Supported employment	37%	21%
Transitional employment	8%	7%

## 5-5: Justice System Involvement

39% of Catawba consumers were under correctional supervision at the time of their Update Interview.

## 5-6: Arrests

	6-months before tx	During tx since last interview
Any arrest	12%	3%
Misdemeanor arrest	11%	2%
Felony arrest	2%	0%

## 5-7: Children Under 18

45% of Catawba consumers have children under age 18.

## 5-8: Custody Issues During Treatment

	# Since Last Assessment
Gained custody of child(ren)	3
Lost custody	1
Began seeking custody	1
Stopped seeking custody	0
Continued seeking custody	8
New baby removed from custody	0

## 5-9: DSS Investigations During Treatment

	# Since Last Interview
Consumer investigated by DSS for child abuse or neglect	4
Investigation was due to infant testing positive on drug screen	0



## Part III

Charts and Graphs 6-1 thru 7-3 compare Initial information with information from Section III of the Update or Episode Completion (Discharge) Interview. Section III has questions that must be answered by the consumer. If the consumer is not available, these items are skipped and left blank. Therefore, these items often represent the responses of fewer consumers.

**\* 56 of the 249 (22%) of Catawba Update Interviews included a personal interview with the consumer.**

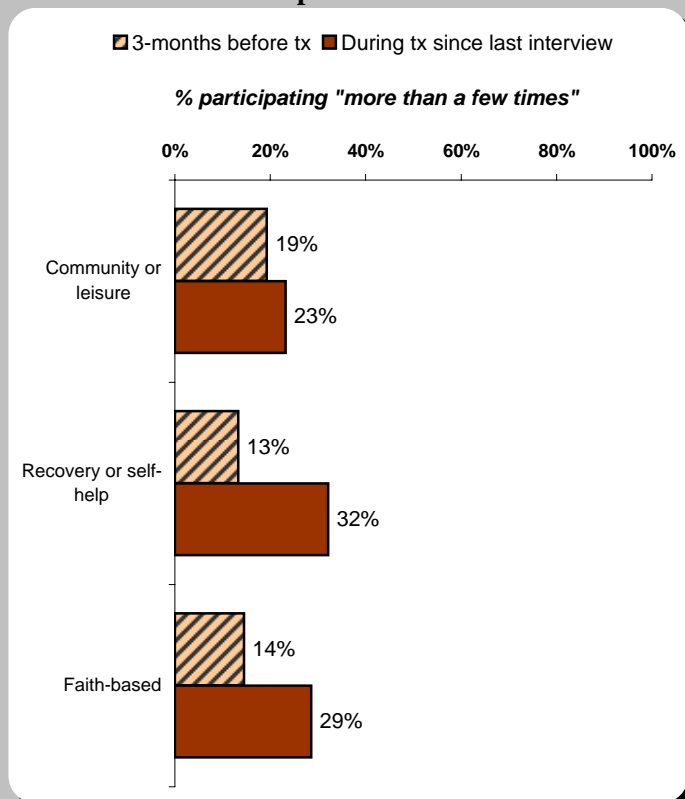
### 6-1: Abstinence from Alcohol and Other Drugs

	Before tx	During tx
90-day abstinence	21%	51%

### 6-2: Used Needle to Inject Drugs

	3 Months since last before tx interview	During tx since last interview
Needle use	7%	0%

### 6-3: Consumer Participation in Positive Activities



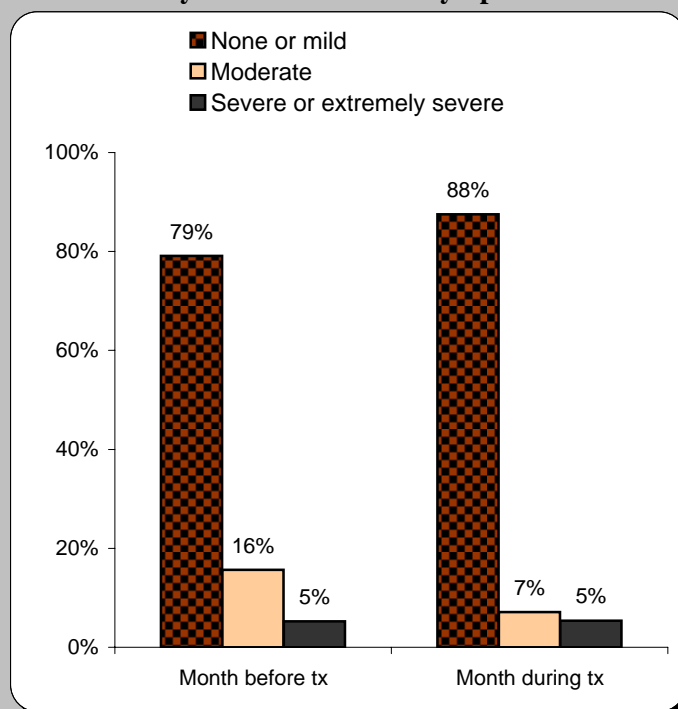
### 6-4: Behavior Problems and Symptoms

	3 Months since last before tx interview	During tx since last interview
Suicidal thoughts	16%	5%
Tried to hurt or cause self pain	3%	5%
Risky Sexual activity	1%	2%
Hit/physically hurt another person	2%	0%

### 6-5: Experienced Violence

	3 Months before tx	During tx since last interview
Physical violence	5%	2%
Sexual violence	0%	2%

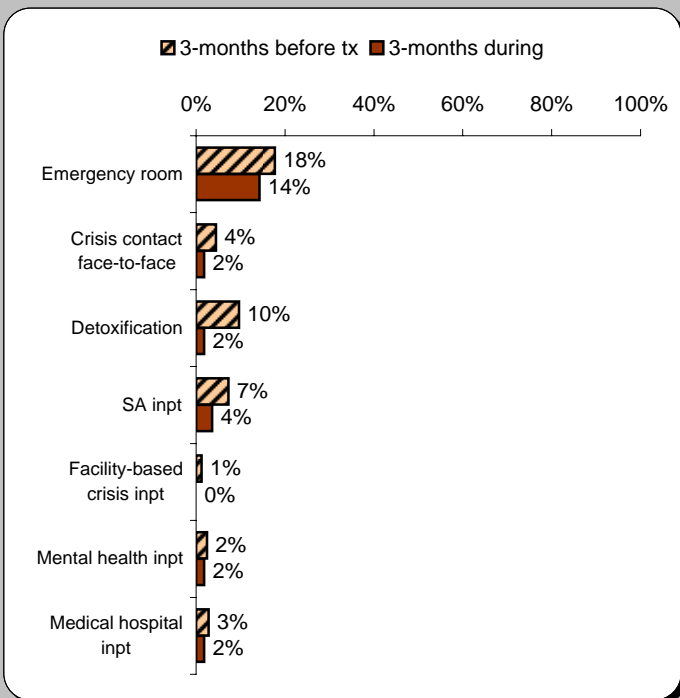
### 6-6: Severity of Mental Health Symptoms



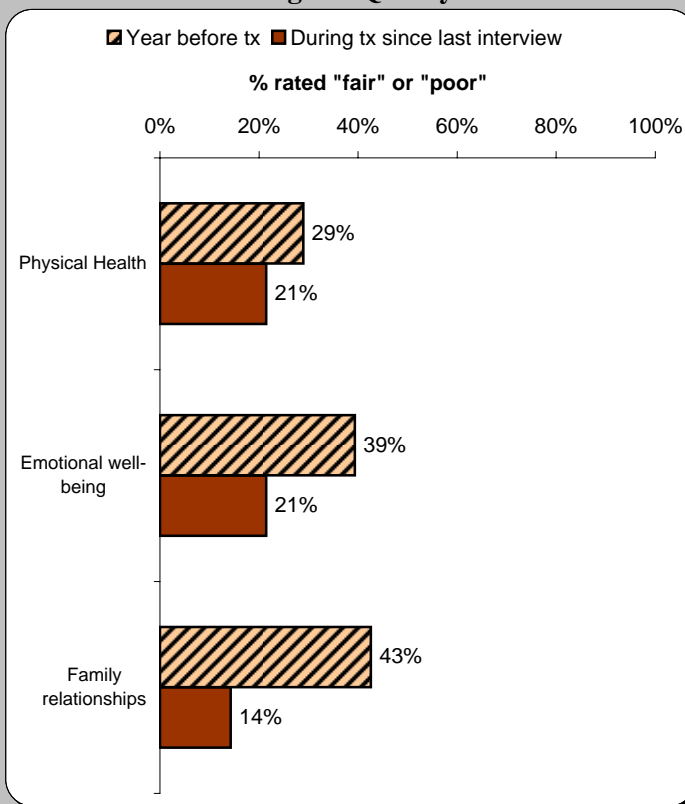
### 6-7: Psychotropic Medications at Update

18% of Catawba consumers have a current prescription for psychotropic medications. Of those, 90% take their medication as prescribed all or most of the time.

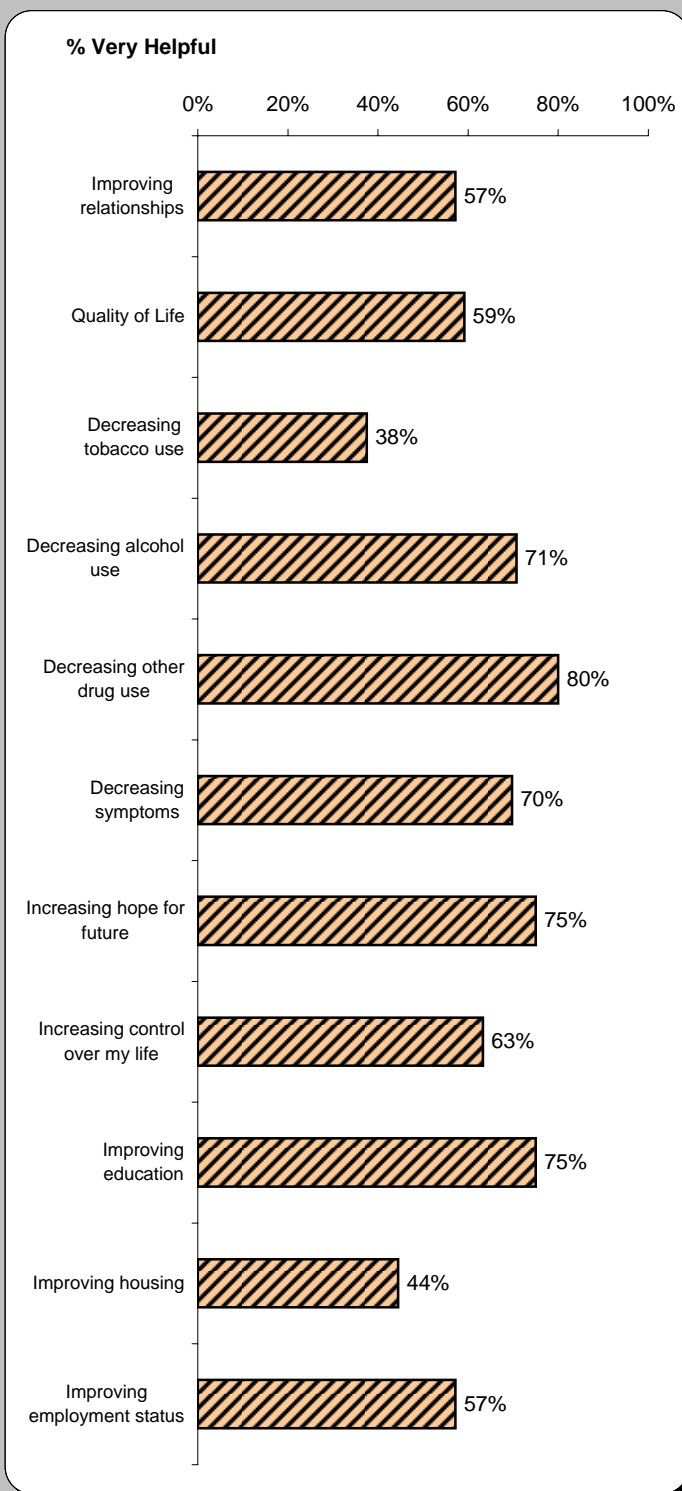
## 7-1: Health Care Received



## 7-2: Consumer Ratings on Quality of Life



## 7-3: Helpfulness of Program Services (of those for whom the service is applicable)



Acronym or Term	Definition
ACT	Assertive Community Treatment
ADMRI	Target population: Adult with both mental retardation and mental illness
ADSN	Target population: Adult with Developmental Disability
Af American	African American
AMDEF	Target population: Adult mental health deaf or hard of hearing
AMOLM	Target population: Adult consumer receiving Olmstead services
AMPAT	Target population: Adult MH consumer who is homeless (PATH program).
AMSMI	Target population: Adult with serious mental illness
AMSPM	Target population: Adult with serious and persistent mental illness
AOD	Alcohol or other drugs
ASCDR	Target population: Adult SA injection drug user at risk for communicable disease
ASCJO	Target population: Adult SA who is a criminal justice offender
ASDHH	Target population: Adult SA consumer who is deaf or hard of hearing
ASDSS	Target population: Adult SA consumer who is involved with DSS
ASDWI	Target population: Adult SA consumer who is receiving DWI offender treatment
ASHMT	Target population: Adult with a chronic substance abuse disorder
ASHOM	Target population: Adult SA consumer who is homeless
ASWOM	Target population: Adult SA consumer who is pregnant or has dependent children
Benzodiaz.	Benzodiazepine(s)
Buprenorph.	Buprenorphine
CASAWORKS	Residential program initiative designed to help substance abusing women
Cauc.	Caucasian
Crim. Justice or CJ	Criminal Justice
CST	Community support team
Detox	Detoxification
DSM	Diagnostic and Statistical Manual (Edition IV)
DSS	Division of Social Services
DWI	Driving while Impaired
GED	General Education Diploma (High School Equivalency)
H or I felon	Class H or I felon (controlled substance) who applied for food stamps
Her	Heroin
Inpt.	Inpatient
Marij.	Marijuana
Med. Mgmt.	Psychiatric medication management services
Methamphet.	Methamphetamine(s)
Methamphet. Tx. Init.	Methamphetamine Treatment Initiative
MH	Mental Health
Outpt. Commitment	Outpatient Commitment
PSR	Psychosocial rehabilitation
PTSD	Post-traumatic Stress disorder
SA	Substance Abuse or Substance Abuser
SSI/SSDI	Supplemental Security Income or Social Security Disability Insurance
TASC	Treatment Accountability for Safer Communities
TBI	Traumatic brain injury
THC	Tetrahydrocannabinol, the psychoactive substance in marijuana
Tobacco cess.	Tobacco cessation
Tx	Treatment
Work First	DSS program for temporary assistance to needy families

Note; Refer to web page for more complete definitions of target populations:

<http://www.dhhs.state.nc.us/mhdd/sas>